Kansas
Department for Aging and Disability Services

SAMPLE TOOL

Use of this tool is not mandated by KDADS for regulatory compliance nor does their completion ensure regulatory compliance. Nursing Homes are welcome to adapt this tool to meet their needs.

QUALITY ASSURANCE and PERFORMANCE IMPROVEMENT

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RESIDENT AT RISK TOOL

IDENTIFICATION, EVALUATION, AND CORRECTION OF RISKS THAT HAVE POTENTIAL FOR RESIDENT INJURY

SOURCES TO IDENTIFY RESIDENTS AT RISK

Residents who actually have problem or have potential for problem

- Quality Measures
- Quality Indicator Survey (QIS) Tools, Interviews, Critical Element (CE) Pathways
- Federal Regulation Guidance
- Resident Sampled in Survey
- Facility Parameters, Admission Assessment
- Specialized Software, ABAQIS (This software is not endorsed by KDADS)
- Staff Report
- INTERACT II – Stop & Watch http://www.interact2.net/ (This program is not endorsed by KDADS)

WORKGROUP

Evaluates status of residents at risk and develop corrective action, i.e. care plan development, revision, and implementation and determine its effectiveness

- **Members 2-10, Composition**
  - Staff most affected by Resident At Risk issue or need for improvement
  - Staff who can provide information to better understand the problem
  - Staff who will effectively receive and provide communication to persons not on workgroup
  - Household/Neighbor – Licensed and Certified Nursing Staff, Social Services Staff, Dietary Staff (CDM, Dietitian), Activity Staff, Restorative Nursing Staff
  - Leadership – DON, Unit Manager, QA Nurse, MDS Nurse, IDT Leader
- **Meeting Plan of Action**
  - Verbal and Chart review resident's status
  - Update Resident at Risk Care Plan
  - Update Resident at Risk CNA Flow Sheet

- **Frequency of meeting**
    - Weekly meeting to review each resident's status individually, evaluate effectiveness of interventions, and create or revise Plan of Action
    - Quarterly Quality Assurance and Assessment and Performance Improvement Committee Meeting. Workgroup member to provide a report of Workgroup's overall findings and trends noted at the weekly meetings. The Committee will set benchmarks for specific areas for which residents are at risk.

RESIDENT AT RISK CONDITIONS

Weight Loss (F325- Regulation Guidance)

- Weight loss or gain 7.5% or more over 6 months (undesired/unplanned)
- Weight loss or gain 5% or more over 3 months (undesired/unplanned)
- Weight loss or gain 3% or more over one month (undesired/unplanned)
- Decreased oral intake

Elopement/Wanderer/Behaviors* CMS–20067 - CE Behavioral & Emotional Status
Restraint Use* CMS-20077 - CE Use of Physical Restraints
Skin

- Pressure Ulcers* CMS-20078 - CE Pressure Ulcers
- Open lesions/sores other than Pressure Ulcer, i.e. stasis ulcers*

Falls* CMS-20072 - CE General

- Recent falls
- Repeated fall

Foley Catheters * CMS-20068 - CE Urinary Incontinence, Urinary Catheter, Urinary Tract Infection
Pain* CMS-20076 - CE Pain Management

- Exhibiting pain in which pain med being adjusted
- Pain Score 3+ on pain scale more than one time per week

Psychoactive medication - F329 - Regulation Guidance

- Unnecessary Medication
- Diagnosis of Alzheimer's or Non-Alzheimer's Dementia & receiving an Antipsychotic

Hydration* CMS-20072 - Nutrition, Hydration, Feeding Tube

- Decreased fluids intake

Infection

- Symptomatic infection process
- UTI* CMS-20068 - CE Urinary Incontinence, Urinary Catheter, Urinary Tract Infection

Feeding Tube* CMS-20072 - Nutrition, Hydration, Feeding Tube

Resident Newly Admitted
Resident/Family Concerns/Complaints
Resident on Medicare Part A with Unplanned Return to Hospital
Resident Discharge to Hospital

*QIS Critical Element Pathway available for At Risk Area
http://www.aging.ks.gov/Manuals/QISManual.htm
Federal Regulation Guidance www.cms.gov/manuals/Downloads/som107ap_pp_guidelines_ltcf.pdf